PART B - FEE(S) TRANSMITTAL



0 7 2005

Complete and send this arm, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

appropriate. In the cornected to maintenance fee notification	respondence including the local pelow or directed otherwise is.	Patent, advance orde in Block 1, by (a) s	ers and notific specifying a	cation of maintenance fees v new correspondence address;	vill be mailed to the current and/or (b) indicating a separate	correspondence address as arate "FEE ADDRESS" for		
	E ADDRESS (Note: Use Block 1 for	any change of address)		Fee(s) Transmittal. The	mailing can only be used f is certificate cannot be used al paper, such as an assignm e of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must		
	90 10/14/2004			nave its own certificate	e or mailing or transmission.			
Hodgson Russ LI	_P			Cer	rtificate of Mailing or Tran	smission		
Intellectual Propert	y Law Group			I hereby certify that the	nis Fee(s) Transmittal is bein with sufficient postage for fir 1 Stop ISSUE FEE address TO (703) 746-4000, on the	g deposited with the United		
One M & T Plaza				addressed to the Mai	1 Stop ISSUE FEE address	above, or being facsimile		
Suite 2000	01/10/2005 RH	EBRAH1 00000023	09931600	transmitted to the USP	TO (703) 746-4000, on the	date indicated below.		
Buffalo, NY 14203	2201		41101044	Barbara Ha	ggerty	(Depositor's name)		
,	01 FC:1501 02 FC:1504		1400.	00 OP / / /	7/200 F.	(Signature)		
	03 FC:8001				ougas G	(D-+-)		
	0.0001		30.	10 UP January 5.	2004	(Date)		
APPLICATION NO.	FILING DATE	FII	RST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/931,600	08/16/2001		Stefan T	hiem	LNUP:104_US_	3014		
PITI E OE INIVENTION: A	PPÅRATUS FOR TREATII	NG OBJECTS						
TILE OF INVENTION. A.	II AKAIOS FOR IKEAIII	NO ODJECTS		•				
	4							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	NO \$1370		\$300	\$1670	01/14/2005		
EXAM	ART UNIT		CLASS-SUBCLASS]				
WALLENHORS	ST, MAUREEN	1743		422-063000				
. Change of correspondence CFR 1.363).	address or indication of "F	ee Address" (37	=	•	, U.	lagan Puga IID		
Change of correspond Address form PTO/SB/12	Correspondence							
			(2) the name	of a single firm (having as	a member a 2			
"Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.	ion (or "Fee Address" Indica or more recent) attached. Use	ation form e of a Customer	2 registered at 2 registered listed, no na	patent attorneys or agents. If me will be printed.	no name is 3			
. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON TH	IE PATENT (print or type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee da of this form is NOT a	ita will appea a substitute fo	r on the patent. If an assign r filing an assignment.	nee is identified below, the o	locument has been filed for		
(A) NAME OF ASSIGN	E Ė	` (B) I	RESIDENCE	: (CITY and STATE OR CO	UNTRY)			
Leica Micros	: systems Nussloc	h GmbH	Nusslo	ch. Germany				
				· _ · _				
					orporation or other private gr	oup entity Government		
la. The following fee(s) are	enclosed:	_	_ ^	` '				
Issue Fee								
	mall entity discount permitte							
Advance Order - # of	Copies 10		The Direct Deposit Accou	or is hereby authorized by c	harge the required fee(s), or (enclose an extra of	credit any overpayment, to copy of this form).		
. Change in Entity Status	(from status indicated above	e)		* ***=				
a. Applicant claims Sl	MALL ENTITY status. See	37 CFR 1.27.	🖬 b. Applicar	nt is no longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).		
The Director of the USPTO NOTE: The Issue Fee and Ponterest as shown by the reco	is requested to apply the Issublication Fee (if required) vords of the United States Pat	ue Fee and Publicatio will not be accepted f ent and Trademark O	on Fee (if any from anyone of ffice.	or to re-apply any previously other than the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in		
Authorized Signature	By I So	//	300.00 0P January 5 , 2004 (Date) FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. Stefan Thiem LNUP:104_US 3014 UE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE \$1370 \$300 \$1670 01/14/2005 T UNIT CLASS-SUBCLASS 1743 422-063000 37 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered attorney or agents) and the names of up to 3 registered attorney or agents. If no name is 3 ON THE PATENT (print or type) mee data will appear on the patent. If an assignee is identified below, the document has been filed for in NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Nussloch, Germany be printed on the patent): Individual Corporation or other private group entity Government 4b. Payment of Fee(s): 3d A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). Date January 5, 2005					
Typed or printed name	George L. Sr	nyder, Jr.			=-			
This collection of information	on is required by 37 CFR 1.3	11. The information	is required to	obtain or retain a benefit by	the public which is to file (an	d by the USPTO to process)		

Inis collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 07/31/2006. OMB 0651-0032

					U.S. Patent and	d Trademark Office	; U.S. D	EPARTMENT	OF COMMERCE	
E.	ffective on 12/08/2004					Complete	f Kno	wn		
A tagas de luint to Consol	idated Appropriations A	et. 2005 (H.F	R. 4818)		ion Number	09/931,600				
	TO A BYO'S ATTOR	TEN A TE		Filing Da		08/16/2001				
FEE TRANSMITTAL					ned Inventor	Stefan Thier				
For FY 2005				Examine	r Name		Maureen Wallenhorst			
□ Applicant claims small entity status. See 37 CFR 1.27				Art Unit			1743			
TOTAL AMOUNT	OF PAYMENT	(\$)1,730.0	00	Attorney	Docket No.	37105.0030	•••			
METHOD OF PAY	MENT (check all the	nat apply)					<u> </u>			
■ Check □ Credit	Card	oney Orde	er	□ None		Other (please ic	lentify):		
■ Deposit Account	Deposit Acco	unt Numl	oer: <u>08-</u> 2	<u> 2442</u>	De	posit Account	Name	Hodgson	Russ LLP_	
For the abov	e-identified deposit	account, t	he Direct	or is hereb	y authorized	to: (check all th	at app	ly)		
□ Charge fee	e(s) indicated below				□ Charge fe	e(s) indicated b	elow, e	except for th	he filing fee	
■ Charge an	y additional fee(s) o CFR 1.16 and 1.17		yments of	fee(s)	_	y overpayments		-	Ü	
WARNING: Inform	nation on this form				t card inforn	nation should i	ot be	included on	this form.	
FEE CALCULATION									** '	
1. BASIC FILING,		XAMINA	TION FI	CES						
,1. 1.1010111111111111111111111111111111	FILING FEE			SEARCH	FEES	EXAMI	IATIO	N FEES		
		all Entity	_		Small Entity		<u>S1</u>	mall Entity		
Application Type Utility		Fee (\$)	Fee (Fee (\$)	Fee (\$)	-	Fee (\$)	Fees Paid (\$)	
Design	300 200	150 100	500 100		250 50	200 130	••	100 65		
Plant	200	100	300	-	150	160	·	80		
Reissue	300	150	500		250	600	10	300		
Provisional	200	100	0	:	0	, 0	. :	0		
2. EXCESS CLAIM F	EES								Small Entity	
Fee Description								<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Each claim over 20 or, f						• •	•	50	25	
Each independent claim Multiple dependent claim		es, each ind	ependent c	laim more t	than in the orig	ginal patent		200 360	100 180	
Total Claims	Extra Clain	ns	Fee (\$)	Fe	e Paid (\$)	М	ultiple	Dependent C		
	r HP =	<u></u>	100 (4)				Fee(\$) Fee Paid (\$)			
HP = highest number of		if greater th	nan 20							
Indep. Claims	Extra Clain	<u>ns</u>	Fee (\$)	<u>F</u>	ee Paid (\$)					
	HP =	_ x		_ = _						
HP = highest number of	•	aid for, if g	reater than	ı 3						
3. APPLICATION										
If the specification an							125 fo	r small entity	y) for each	
additional 50 sheets o										
Total Sheets	$ \frac{\text{Extra Sheets}}{50} = \frac{50}{50} $	Nui			nal 50 or fract whole number		<u>ee (\$)</u>	= .	Fee Paid (\$)	
4. OTHER FEE(S)	750		(10	und up to a	whole number	· · ·		. – .	Essa Daid (6)	
Non-English Specific	ation \$130	fee (no sn	nall entity	discount)					Fees Paid (\$)	
	blication fee and 10			discounty				•	1,730.00	
SUBMITTED BY	- 12 11	• , ,	-/1			22.200	<u> </u>			
SIGNATURE A A				Registration No.37,729 (Attorney/Agent)			Tel	Telephone 716-856-4000		
NAME (Print/Type) George L. Snyder, Jr.							Da	Date January 5, 2005		
I hereby Certify t P.O. Box 1450, Alexandria, Vi	hat this Correspondence is b rginia 22313-1450, on			ted States Post	al Service as First	Class Mail in an envel	ope addre	essed to: Commiss	sioner for Patents,	

Boubra Daggerty Barbara Haggerty Name 1132354

__January 5, 2005 Date of Signature